## **Glossary of Terms**

**Additional Incentive** - an adoption incentive not to exceed \$7,500 or an incentive of equivalent value above the *Base Incentive* awarded on a one-time basis to a primary care practice that meets additional criteria in the use and adoption of electronic health records including: a) contracts with a State-Designated MSO for EHR adoption or implementation services; b) demonstrates advanced use of EHRs; c) participates in the payer's quality improvement outcomes initiative, and achieves the performance goals established by the payer. Payers may implement a variety of approaches in calculating the *Additional Incentive* and determining a practice's qualification as it relates to advanced use of an EHR. Please contact the payer for details regarding its *Additional Incentive* calculation criteria.

**Base Incentive** - an adoption incentive not to exceed \$7,500 or an incentive of equivalent value awarded on a one-time basis to a primary care practice that is based on a per patient amount applied to the total number of the payer's member patients who are treated by the primary care practice. A payer may exclude plan participants from the incentive calculation for a practice that was previously included in another practices' incentive calculation. Payers may exclude patients from the *Base Incentive* calculation who are enrolled in a self-insured health plan at the time of the payment request.

**Electronic health record (EHR)** - an EHR system certified by an authorized testing and certification body designated by the Office of the National Coordinator for Health Information Technology and: 1) contains health-related information on an individual that includes patient demographic and clinical health information; 2) has the capacity to: provide clinical decision support; support physician order entry; capture and query information relevant to health care quality; and 3) exchange and integrate electronic health information from other sources.

**EHR adoption incentive** - a cash payment, or a payment incentive of equivalent value agreed upon by the primary care practice and payer, that an eligible primary care practice can receive from a payer to assist the primary care practice in adopting and implementing an electronic health record.

**Incentive of equivalent value** – a practice may choose a non-cash incentive, agreed upon with the payer, that includes any of the following: specific services; gain-sharing arrangements; reward for quality and efficiency; in-kind payment; or other items or services that can be assigned a specific monetary value.

Management service organization (MSO) - an organization that offers one or more hosted EHR solutions and other technical assistance services to health care providers and has received recognition by the Maryland Health Care Commission as a State-Designated MSO or has applied with the Maryland Health Care Commission for recognition as a State-Designated MSO and has been granted Candidacy Status.

**Payer** - a State-regulated carrier that issues or delivers health benefit plans in the State and includes: Aetna, Inc.; CareFirst BlueCross Blue Shield; CIGNA Health Care Mid-Atlantic Region; Coventry Health Care; Kaiser Permanente; UnitedHealthcare, MidAtlantic Region; and the Maryland State employee and retiree health and welfare benefits program.

**Practice panel** - the patients assigned by a payer to a provider within a primary care practice, or when a payer does not assign patients to a provider within a primary care practice, the number of patients actively enrolled with the payer at the time of the payment request, and who have been treated by the practice within the previous 24 months from the date of the payment request. Payers may exclude patients from the practice panel who are enrolled in a self-insured health plan at the time of the payment request.

**Primary care practice** - a medical practice located in Maryland that is comprised of one or more physicians who provide medical care in family, general, geriatric, internal medicine, pediatric, or gynecologic practice.

**Quality improvement outcomes program** - a program comprised of various nationally endorsed quality improvement indicators which, for the purpose of this incentive program, include indicators regarding the basic adoption and the advanced use of the EHR.

State-Regulated Payer EHR Adoption Incentive Application Acknowledgement Letter - a letter sent by the payer to the primary care practice acknowledging receipt of the primary care practice's EHR adoption incentive application.